

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000148313

FILED  
Feb 03, 2011  
Secretary of State

**Entity Name:** VACATION PROCESSING SERVICES, INC.

**Current Principal Place of Business:**

1200 NW 78 AVE  
SUITE 110  
MIAMI, FL 33126

**New Principal Place of Business:**

**Current Mailing Address:**

1200 NW 78 AVE  
SUITE 110  
MIAMI, FL 33126

**New Mailing Address:**

**FEI Number:** 20-5994369

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GONZALEZ, ALFREDO L ESQ  
2525 PONCE DE LEON BLVD  
STE 400  
CORAL GABLES, FL 33134 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** COLUSSI, ETTORRE  
**Address:** 1200 NW 78 AVE SUITE 110  
**City-St-Zip:** MIAMI, FL 33126

**Title:** D  
**Name:** BLANCO, RAFAEL  
**Address:** 1200 NW 78 AVE SUITE 110  
**City-St-Zip:** MIAMI, FL 33126

**Title:** D  
**Name:** CUTRI, TOMMASO  
**Address:** 1200 NW 78 AVE SUITE 110  
**City-St-Zip:** MIAMI, FL 33126

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** GILDA NOBOA

DS

02/03/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date